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26694 7590 02/15/2006

**VENABLE LLP**  
**P.O. BOX 34385**  
**WASHINGTON, DC 20045-9998**

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/807,356	03/24/2004	Rolf Brunner	38412-201156	5381

TITLE OF INVENTION: OPTICAL SENSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/15/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
LAU, HOI CHING	2636	340-555000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<input type="checkbox"/> 1 VENABLE LLP <input type="checkbox"/> 2 ROBERT KINBERG <input type="checkbox"/> 3 JEFFREY W. GLUCK, Ph.D.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Leuze lumiflex GmbH & Co., KG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fürstenfeldbruck 05/10/2006 11BEYENE2 00000010 220261 10807356

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or  Association  Group entity  Government

4a. The following fee(s) are enclosed:

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 Publication Fee (No small entity discount permitted)  
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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 22-0261 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date

5/9/06

Typed or printed name

Robert Kinberg

Registration No.

26,924

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